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(Re	questor's Name)	
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то;	Registration Se Division of Cor			*
SUBJE	GNH REA	LTY, LLC		
., O D.J.E.	C1	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Gregorio Herrera		
			Name of Person	
		4025 SW 96 Ave	Pirm/Company	 .
		Miami, FL, 33165	Address	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For furtl	her information c	oncerning this matter, please ca	all:	
Gregori	o Herrera		786 472-1933	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclose	d´is a check for tl	ne following amount:		
\$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GNH REALTY, LLC			
(<u>Name of the Limi</u>	ted Liability Compa (A Florida Limited)	ny as it now appears on our Liability Company)	records.)
the Articles of Organization for this Limited L lorida document number L12000120802		were filed on $\frac{09/21/2012}{}$	2 and assigned
his amendment is submitted to amend the foll			
. If amending name, enter the new name o	f the limited liab	ility company here:	
he new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	
Enter new principal offices address, if applicable:		4025 SW 96 Ave.	2019 SEC TA
Principal office address MUST BE A STREET ADDRESS)		Miami, Fl. 33165	AU T
Inter new mailing address, if applicable:		4025 SW 96 Ave.	HASSEE.
Mailing address MAY BE A POST OFFICE BOX)		Miami, Fl. 33165	<u> </u>
. If amending the registered agent and egistered agent and/or the new registered o	_		ecords, enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	4025 SW 96 A	· · · · · · · · · · · · · · · · · · ·	
		Enter Florida stree	t address
	Miami		, Florida <u>33165</u>
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			Remove
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trine diffe inserted	than the date of filithe date must be specific as I in this block does not to on the Department of	meet me appheable	ate of filing or more the statutory filing req	(optional) an 90 days after filing.) uirements, this date v	Pursuant to 605.020' vill not be listed as
record specifies a	delayed effective the record is filed	date, but not ar I.	n effective time,	, at 12:01 a.m. o	n the earlier o
he 90th day after					
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ne sour day after	Signature of a	2019	d representative of a n	nember	

Page 3 of 3

Filing Fee: \$25.00